

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>BS</i>	<i>70381</i>	<i>2/16</i>
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW			
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral)..... Canceled A Appeal
 + Restricted O Objected

BEST AVAILABLE COPY

Claim	Final	Original	Date
1	✓	✓	9/10/01
2	✓	✓	5/16/02
3	✓	✓	1/27/03
4	✓	✓	9/18/03
5	✓	✓	9/18/03
6	✓	✓	9/18/03
7	✓	✓	9/18/03
8	✓	✓	9/18/03
9	✓	✓	9/18/03
10	✓	✓	9/18/03
11	✓	✓	9/18/03
12	✓	✓	9/18/03
13	✓	✓	9/18/03
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46	✓	✓	9/18/03
47	✓	✓	9/18/03
48	✓	✓	9/18/03
49	✓	✓	9/18/03
50	✓	✓	9/18/03

Claim	Final	Original	Date
51	✓	✓	9/18/03
52	✓	✓	9/18/03
53	✓	✓	9/18/03
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100	✓	✓	9/18/03

Claim	Final	Original	Date
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if more than 150 claims or 10 actions
 state additional sheet here

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